

09/532 786

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		3-30-00
O.I.P.E. CLASSIFIER			3-4-00
FORMALITY REVIEW	Umb	108231	5-5-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7-9-02
2	✓	✓	2-7-03
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
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Best Available Copy

If more than 150 claims or 10 actions  
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